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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Effective December 8, 2004										Application of Booking Humber		
APPLICATION AS FILED - PART ((Column 1) (Column 2)								SMALL ENTITY			OTHER THAN SMALL ENTITY	
FOR .			NUMBER FILED		, ,	NUMBER EXTRA		RATE (\$)	FEE (5)		RATE (\$)	FEE (\$)
BASIC FEE D7 CFR 1 18(a) (b) or (c))			NA			NIA		N/A .	150.00	1	N/A .	300.00
SEARCH FEE (37 CFR 1 16(1), (4, or (m))			NA			NIA		N/A	\$250	1:	· N/A	\$500
EXAMINATION FEE (B) CFR 1 (610), (p), or (q))			N/A			NIA		N/A	\$100] .	N/A	\$200
TOTAL CLAMS D7.OFR 116(1)			minus 20		20 = .			K\$ 25 .		OR	X\$50 .	
INDEPENDENT CLAIMS (37 OFR 1 16(N))		AIMS	minus 3 ≂		3 = .	•		X100 .			X200	
APPLICATION SIZE FEE (37 CFR 1 16(4))			If the specification and a sheets of paper, the app is \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a			plication size fee due entity) for each fraction thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(1))								+180=			+360=	
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		, 1	TOTAL	
APPLICATION AS AMENDED - PART II										.**		*.
(Column 1) (Column 2) (Column 3)								SMALL E	NTITY .	OR	OTHER	
AMENDMENT A	·	CLÁIM: REMAINI AFTER AMENDMI			HIGHES NUMBER PREVIOUS PAID FO	PRESENT EXTRA		RATE (S)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total GT CFR LINGS	•		Minus	*	*	X	\$ 25		OR .	X\$50 .	
	Independent (DF CFR 1.16(h))	•	•	Minus	•	3] [3	(100 -		ØR.	X200 _	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				EM CLVIM (2	7 CFR 1.16@)	J	180=		OR	+360=	
								OTAL DD'L FEE		OR	ADD'L FEE	
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Đ٢	1 120	CLAIN REMAIN AFTE AMENON	IING R.	:	HIGHEST NUMBER PREVIOUS PAID FOR	PRESENT EXTRA		rate (3)	ADDI- TIONAL FEE (S)	•	RATE (\$)	ADDI- TIONAL REE (\$)
	Total OF OFR LIGHT	. D	Ò	Minus	- 26] [2	\$ 25 .		OR .	X\$50 =	\ <u>`</u>
	Independent (37 CFR 1.14(h))	• • 4		Minus ·	- (b	•		(100 .	/:	OR ·	X200 _	
割	Application Size Fee (37 CFR 1.16(s))											
l	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16@)							180=		OR	+360=	
	•						AC	DI FEE		OR	TOTAL ADD'L FEE	
*	If the Highest N	umber Pre	viously i	Paid For I	IN THIS SPA	write "0" in column CE is less than 20, CE is less than 3, o	enter 2	or.				

The Trighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

Second color of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, buding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief, Information Officer, U.S. Patent 1 Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS DRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.